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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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EXAMINER

SOTOMAYOR, JOHN

ART UNIT PAPER NUMBER

3714

DATE MAILED: 12/01/2003

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Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary

Application No.

09/739,357

Applicant(s)

AMAN, CRAIG S.

Examiner

John L Sotomayor

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-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
- Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 11 August 2003.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-43 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-43 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 19 December 2000 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. §§ 119 and 120

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
2. ☐ Certified copies of the priority documents have been received in Application No. _____.
3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
* See the attached detailed Office action for a list of the certified copies not received.
- 13) ☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. § 119(e) (to a provisional application) since a specific reference was included in the first sentence of the specification or in an Application Data Sheet. 37 CFR 1.78.
a) ☐ The translation of the foreign language provisional application has been received.
- 14) ☐ Acknowledgment is made of a claim for domestic priority under 35 U.S.C. §§ 120 and/or 121 since a specific reference was included in the first sentence of the specification or in an Application Data Sheet. 37 CFR 1.78.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892) 4) ☐ Interview Summary (PTO-413) Paper No(s). _____
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948) 5) ☐ Notice of Informal Patent Application (PTO-152)
- 3) ☒ Information Disclosure Statement(s) (PTO-1449) Paper No(s) 4 . 6) ☐ Other: _____

DETAILED ACTION

Continued Examination Under 37 CFR 1.114

1. A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submission filed on August 11, 2003 has been entered.

Claim Rejections - 35 USC § 102

The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

2. Claims 38 and 40 are rejected under 35 U.S.C. 102(e) as being anticipated by Hon (US 6,074,213).

Regarding claim 38, Hon discloses an instructional method simulating the control of medical devices under the direction of a rule-based expert system, simulating the first aid use of the medical device and providing feedback to the user concerning the correct results from the device (Col 9, lines 5-44).

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Regarding claim 40, Hon discloses a system and method within which the display stations, which interact with a user through a Graphical User Interface (GUI), are equipped with a voice interface for audio interaction with the user (Col 4, line 61, Col 15, lines 39-41).

Claim Rejections - 35 USC § 103

3. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

The factual inquiries set forth in *Graham v. John Deere Co.*, 383 U.S. 1, 148 USPQ 459 (1966), that are applied for establishing a background for determining obviousness under 35 U.S.C. 103(a) are summarized as follows:

1. Determining the scope and contents of the prior art.
2. Ascertaining the differences between the prior art and the claims at issue.
3. Resolving the level of ordinary skill in the pertinent art.
4. Considering objective evidence present in the application indicating obviousness or nonobviousness.

4. Claims 1,4,5,7-10,12-14,16,18-19,21-24,26,27,30-31 and 33-36 are rejected under 35 U.S.C. 103(a) as being unpatentable over Hon (US 6,074,213) in view of Ramshaw et al (US 5,791,907).

Regarding claims 1 and 27, Hon discloses a system, method and apparatus for the training of users of a medical system. Hon discloses that educational instructions are pre-loaded into the system and available for recall by users of the system contacting the rule-based expert

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system component (Col 3, lines 16-44). The instructions and simulation information are provided to the users via a plurality of displays on graphical user interfaces over networked devices. (Col 4, lines 56-64, Fig 11). Hon discloses generating feedback to supply information to team members using the medical device (Col 11, lines 36-38). Hon does not specifically disclose that the feedback is used to indicate the correctness of the use of the medical device or whether a particular interaction is appropriate under given conditions. However, it is common and well-known practice to utilize a feedback loop for informing users as to the correct use of any device in which feedback has been implemented. In addition, Ramshaw et al teaches a network connected interactive medical training system for teaching students how to use medical devices in which a student is presented with a selection of instruments for use in a particular procedure step and will rerequest the information on instrument use until the user enters the appropriate answer where the answer is the appropriate instrument for use in that particular step of the procedure under the conditions pertaining in the simulated procedure (Col 3, lines 33-43). Therefore, it would have been obvious to one of ordinary skill at the time of invention to extend an existing feedback information stream to include informing users as to the correct use of a medical device as disclosed by Hon in combination with whether a particular interaction is appropriate under given conditions as taught by Ramshaw et al for the purposes of imprinting in the student the correct instrument to use under a plurality of conditions.

Regarding claims 4, 18 and 30 Hon discloses a system and method within which the display stations, which interact with a user through a Graphical User Interface (GUI), are equipped with a voice interface for audio interaction with the user (Col 4, line 61, Col 15, lines 39-41).

Regarding claims 5,19, and 31, Hon discloses that the instructional system and method may use the Internet and intranets for communication between users (Col 16, lines 11-16). Hon does not specifically state that the navigation capability of the GUI in use by the system and method is linear and non-linear. However, it is common and well known to use a web browser as a means of navigation on Internet capable display devices. Inherent to a web browser is the capacity for linear and non-linear navigation from web page to web page. Therefore, it would have been obvious to one of ordinary skill in the art to provide linear and non-linear navigation capability to any system and method utilizing the Internet for connectivity between users.

Regarding claims 7-9, 12,13,21-23,33-35, Hon discloses that the instructional information from the expert system may be provided to the users through visual means, including images, video and animation of the subjects in use (Fig 17, Col 14, lines 36-46).

Regarding claims 10, 24, and 36, Hon discloses a simulator with a rule-based expert system that provides a view of various team performance actions in relation to the medical task presented, thus providing the operational steps of a task in proper sequential order (Col 16, lines 23-25).

Regarding claim 14, Hon discloses an educational system with a network, user computers coupled to the network, and a server with educational instructions pre-loaded into the system and available for recall by users of the system contacting the rule-based expert system component (Col 3, lines 16-44). The instructions and simulation information are provided to the users via a plurality of displays on graphical user interfaces over networked devices. (Col 4, lines 56-64, Fig 11). Hon discloses generating feedback to supply information to team members using the medical device (Col 11, lines 36-38). Hon does not specifically disclose that the feedback is

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used to indicate the correctness of the use of the medical device. However, it is common and well-known practice to utilize a feedback loop for informing users as to the correct use of any device in which feedback has been implemented. In addition, Ramshaw et al teaches a network connected interactive medical training system for teaching students how to use medical devices in which a student is presented with a selection of instruments for use in a particular procedure step and will rerequest the information on instrument use until the user enters the appropriate answer where the answer is the appropriate instrument for use in that particular step of the procedure under the conditions pertaining in the simulated procedure (Col 3, lines 19-43).

Therefore, it would have been obvious to one of ordinary skill at the time of invention to extend an existing feedback information stream to include informing users as to the correct use of a medical device as disclosed by Hon in combination with whether a particular interaction is appropriate under given conditions as taught by Ramshaw et al for the purposes of imprinting in the student the correct instrument to use under a plurality of conditions.

Regarding claim 16, Hon discloses a system capably connected either through the Internet or over an intranet (Col 16, lines 11-16).

Regarding claim 26, Hon discloses educational system instructions on a computer readable medium used with a network, a plurality of user computers coupled to the network, and a server with educational instructions pre-loaded into the system and available for recall by users of the system contacting the rule-based expert system component (Col 3, lines 16-44). The instructions and simulation information are provided to the users via a plurality of displays on graphical user interfaces over networked devices. (Col 4, lines 56-64, Fig 11). Hon discloses generating feedback to supply information to team members using the medical device (Col 11,

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lines 36-38). Hon does not specifically disclose that the feedback is used to indicate the correctness of the use of the medical device. However, it is common and well-known practice to utilize a feedback loop for informing users as to the correct use of any device in which feedback has been implemented. In addition, Ramshaw et al teaches a network connected interactive medical training system for teaching students how to use medical devices in which a student is presented with a selection of instruments for use in a particular procedure step and will rerequest the information on instrument use until the user enters the appropriate answer where the answer is the appropriate instrument for use in that particular step of the procedure under the conditions pertaining in the simulated procedure (Col 3, lines 19-43). Therefore, it would have been obvious to one of ordinary skill at the time of invention to extend an existing feedback information stream to include informing users as to the correct use of a medical device as disclosed by Hon in combination with whether a particular interaction is appropriate under given conditions as taught by Ramshaw et al for the purposes of broadening the base of information available to a student to arrive at a correct solution more quickly.

5. Claims 39 and 41-43 are rejected under 35 U.S.C. 103(a) as being unpatentable over Hon in view of Parker et al (US 6,321,113).

Regarding claim 39, Hon discloses a defibrillator station in which an external defibrillator may be inserted for use by the medical team. Hon does not specifically disclose that the defibrillator is an Automated External Defibrillator. However, Parker et al teaches that for a good networked connection at a remote site from the main analysis computer an Automated External Defibrillator is preferred (Col 3, lines 42-64). The AED taught by Parker et al has the networked features that would allow it to be seamlessly integrated into the defibrillator station

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discloses by Hon. Therefore, it would have been obvious to one of ordinary skill in the art to provide a defibrillator station in which an external defibrillator may be inserted for use by the medical team as disclosed by Hon and including an AED as the preferred defibrillation device in the training system as taught by Parker et al for the purposes of assisting a student in selecting a appropriate device for use in a medical procedure.

Regarding claims 41-43, Hon discloses that the instructional information from the expert system may be provided to the users through visual means, including images, video and animation of the subjects in use (Fig 17, Col 14, lines 36-46). Hon does not specifically disclose that text description is associated with the visual means of instructing users. However, Parker et al teaches that both graphical and textual data of interest to the medical use in progress may be represented on a single screen for use of medical practitioners (Col 5, lines 15-26). Therefore, it would have been obvious to one of ordinary skill in the art at the time of invention to provide a text description of one or more steps associated with the graphical representation pertaining to operation of the medical device. Therefore, it would have been obvious to one of ordinary skill in the art to provide an instructional information from the expert system may be provided to the users through visual means, including images, video and animation of the subjects in use as disclosed by Hon with a text description is associated with the visual means of instructing users as taught by Parker et al for the purposes of producing a medical training device that provides users with textual description of a visual image for a more robust training experience.

6. Claims 2,6,11,15,20,25,28,32 and 37 are rejected under 35 U.S.C. 103(a) as being unpatentable over Hon in view of Ramshaw et al in further view of Parker et al.

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Regarding claims 2, 11, 15, 25, 28 and 37, Hon discloses a defibrillator station in which an external defibrillator may be inserted for use by the medical team. Hon does not specifically disclose nor does Ramshaw et al teach that the defibrillator is an Automated External Defibrillator. However, Parker et al teaches that for a good networked connection at a remote site from the main analysis computer an Automated External Defibrillator is preferred (Col 3, lines 42-64). The AED taught by Parker et al has the networked features that would allow it to be seamlessly integrated into the defibrillator station disclosed by Hon. Therefore, it would have been obvious to one of ordinary skill in the art to provide a defibrillator station in which an external defibrillator may be inserted for use by the medical team as disclosed by Hon with an Automated External Defibrillator as taught by Parker et al for the purposes of including an AED as the preferred defibrillation device in the training system.

Regarding claims 6, 20, and 32, Hon discloses a system and method for instructional connection and communication between users of physically separate medical devices, each user of which has a physical display device. Hon does not specifically disclose nor does Ramshaw et al teach that the instructional information provided to users of the system is in text format. However, Parker et al teaches a physically remote AED device connected via a network connection to a remote computer that provides instruction displayed to the user in text format (Col 3, lines 35-40, Fig 1). The system and method disclosed by Hon indicates a rule-based expert system that assists with instruction and the system and method taught by Parker et al displays the rules for the system use as text retrieved from a rules database. Therefore, it would have been obvious to one of ordinary skill in the art to provide a system and method for instructional connection and communication between users of physically separate medical

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devices, each user of which has a physical display device as disclosed by Hon with instructional information from the rules database on the steps necessary to utilize a connected medical device in text format on the GUI as taught by Parker et al for the purposes of providing instant help information to a student during training exercise.

7. Claims 3, 17, and 29, are rejected under 35 U.S.C. 103(a) as being unpatentable over Hon in view of Ramshaw et al in further view of Parker et al in further view of Olson et al (US 5,645,571). Hon discloses that a plurality of medical devices may be attached to the instructional system and method. Hon does not specifically disclose nor do Ramshaw et al or Parker et al teach operation, troubleshooting or maintenance of these medical device items. However, Olson et al teaches an AED that has self-diagnostic capability as well as providing troubleshooting and device maintenance indicators and instructions (Figs 3 and 4). In attaching the instant AED to a rule-based expert system these troubleshooting, maintenance and diagnostic capabilities could be easily incorporated and displayed to the users in the same manner as any other system or method instructions. Therefore, it would have been obvious to one of ordinary skill in the art to provide a system and method for training on a defibrillator device in communication with a network as disclosed by Hon with help diagnostic that incorporates the existing utility, operation, troubleshooting and maintenance instructions of all medical devices to be connected to the rule-based expert system as taught by Olson et al for the purposes of providing on-site troubleshooting and maintenance as a part of a training exercise.

Response to Arguments

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Applicant's arguments with respect to claims 1-43 have been considered but are moot in view of the new ground(s) of rejection.


Conclusion

Any inquiry concerning this communication or earlier communications from the examiner should be directed to John L Sotomayor whose telephone number is 703-305-4558. The examiner can normally be reached on 6:30-4:00 M-F.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Tom Hughes can be reached on 703-308-1806. The fax phone number for the organization where this application or proceeding is assigned is 703-746-8361.

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the receptionist whose telephone number is 703-305-4558.

jls
November 19, 2003


S. THOMAS HUGHES
SUPERVISORY PATENT EXAMINER
TECHNOLOGY CENTER 3700